| ) IPE       | MAR 1 8.20  |   | <b>G</b>  | C D A TENT         | · AND TO A DE                               | MADE OFFICE   |           | a                 | 27-0!           |  |
|-------------|---|---|---|--------------------|---|---------------|-----------|-------------------|-----------------|--|
| IAR 1 8 200 |   | مار<br>الايد                              | Mitsuru Nagasal   |                    | AND TRADE                                   | MARK OFFICE   | ž.<br>,   | Ari               | ,               |  |
|             | Applicant(s) CHADESE  |   | _   | Ka et al.          |   |               |           |                   |                 |  |
| MAGENA      | Serial No.  |   | 09/613,067  |                    |   |               |           |                   |                 |  |
|             | Filed   |   | July 10, 2000   | N DECENT           | NC ADDADAT                                  | LIC AND A MET | ~UOD      |                   |                 |  |
|             | For   |   | INFORMATION RECEIVING APPARATUS AND A METHOD THREFORE                         |                    |   |               |           |                   |                 |  |
|             | Examiner  | :   | Johnny Ma   |                    |   |               |           |                   |                 |  |
|             | Art Unit : 2614 745 Fifth Avenue New York, NY 1 Tel: 212-588-080  |   |   |                    |   |               | NY 10151  |                   |                 |  |
|             | Commissioner for Pate<br>P.O. Box 1450  |   |   |                    |   |               |           | RECEIV            | ED              |  |
|             | Alexandria, VA 22313<br>Dear Sir:   |   |   |                    |   |               |           | MAR 2 2 2         | 003             |  |
|             | Transmitted herewith is an amendment in the above-identified application.  No additional fee is required.  The fee has been calculated as shown below.  This is an application of a small entity under 37 CFR 1.9(f), and the amounts shown in parentheses apply.  Claims as Amended  |   |   |                    |   |               |           |                   | ter <b>2600</b> |  |
| -           | (1)   | · · · · · · · · · · · · · · · · · · ·     | 2)  | (3)                | (4)   | (5)           | (6)       | (7)               |                 |  |
|             | (1)   | Claims rem                                | 2)<br>naining after<br>dment  | (3)                | Highest<br>number<br>previously<br>paid for | Present extra | Rate      | Additional<br>Fee |                 |  |
|             | Total claims  | 11  |   | Minus              | ** = 20                                     | * 0 x         | \$18 (9)  | = \$ 0.00         |                 |  |
| -           | Independent claims  | 3   |   | Minus<br>Total add | itional fee for th                          | * 0 x         | \$86 (43) | \$ 0.00           |                 |  |
| -           | * If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.  ** If the highest number of total claims previously paid for is less than 20, write "20" in this space.  *** If the highest number of independent claims previously paid for is less than 3, write "3" in this space.  ☐ This application contains a multiple dependent claim. The required fee of \$290(145) has been previously paid ☐, or is paid herewith ☐. |   |   |                    |   |               |           |                   |                 |  |
|             | This response is being filed within the month following the expiration of the term originally set therefor. This is a petition to request a -month extension of time. A check covering the cost of the petition is enclosed.  |   |   |                    |   |               |           |                   |                 |  |
|             | ☐ A check in the amount of \$ is attached, which covers the cost of ☐ additional claims ☐ petition for extension  |   |   |                    |   |               |           |                   |                 |  |
|             | Charge \$ to 1  | Charge \$ to Deposit Account No. 50-0320. |   |                    |   |               |           |                   |                 |  |
|             | Please charge any additional fees incurred by reason of this response or credit any overpayment to Deposit Account No. 50-0320.   |   |   |                    |   |               |           |                   |                 |  |
|             | I hereby certify that this co<br>the United States Postal Se<br>addressed to: Mail Stop A<br>1450, Alexandria, VA 22<br>Bruno   | FROMMER                                   | Respectfully submitted,  FROMMER LAWRENCE & HAUG LLP Attorneys for Applicants |                    |   |               |           |                   |                 |  |

Name of Applicant, Assignee or Registered Representative Signature

March 16, 2004

Date of Signature

FROMMER LAWRENCE & HAUG LLP Attorneys for Applicants

Bruno Polito

Reg. No. 38,580 Tel: 212-588-0800

By:

PATENT 450100-02611

<u>IN THE UNITED STATES PATENT AND TRADEMARK OFFICE</u>

Applicani(s)

Mitsuru Nagasaka et al.

Serial No.

09/613,067

For

INFORMATION RECEIVING APPARATUS AND

A METHOD THEREFORE

Filed

July 10, 2000

Examiner

Johnny Ma

Art Unit

2614

745 Fifth Avenue New York, New York 10151

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on March 16, 2004.

Bruno Polito, Reg. No. 38,580

Name of Applicant, Assignee or Registered Representative

Bo Signature

March 16, 2004

Date of Signature

RECEIVED

MAR 2 2 2003

Technology Center 2600

## AMENDMENT AFTER FINAL ACTION

Mail Stop AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

In response to the Final Action mailed January 20, 2004, please amend the above-

-1-

identified application as follows.

00176315